STATE OF WASHINGTON

DEPARTMENT OF HEALTH

Olympia, Washington 98504

Nursing Care Quality Assurance Commission
Continuing Competency Sub-committee meeting
April 17, 2007
Telephone Conference Call 7 – 9 p.m.
310 Israel Road SE, Olympia, WA 98504

Minutes

Members Present: Todd Herzog, Chair, Judy Personett, Marianne Williams, Linda Batch, Robert Salas, Sue Woods, Rhonda Taylor.

DOH Staff: Paula Meyer

Guest: Chuck Cumiskey

I.   Call to order/Roll Call

II. Approval of minutes – no minutes since the last Nursing Commission meeting

III. Old Business - Advisory Groups

> **A.**   Charters for the five advisory groups
> 1.   Format and structure of reporting to sub-committee as the steering committee
> 2.   Develop purpose statements for each advisory group
>
> The group agreed that the July 2007 workshop will be dedicated to Continuing Competency. The plan is for the morning to be a presentation from Linda Burhans from the North Carolina Board of Nursing. Ms. Burhans has been actively involved in the implementation of the North Carolina continuing competency effort. Todd will contact Ms. Burhans to see if she is available on July 12 for the workshop. Paula will work on the process and paperwork to support the travel. The afternoon of the workshop will be dedicated to small group work on continuing competency. While five distinct groups were anticipated at the March NCQAC meeting, there may be more groups needed.
>
> The plan is to have a conference call with Ms. Burhans during the next sub-committee meeting, scheduled for May 15, this may not be possible due to the time difference from west to east coast. Paula will check on times and dates Ms. Burhans and the sub-committee members are available. Workshop agenda items, schedule, etc., will be the topic of the conference call. *Attached are the potential groups and some of the discussion around the charters.*

B. <u>Potential leads – pro tem assignments</u>
   1. Review resumes of people who are interested: Joan Caley, Pam Smith, Kim Fields, Marianne's contact, Chuck Cumiskey, Peggy Currie
   2. Assign them to a group
   3. Paula to pursue pro-tem appointments with Bonnie King
   4. Sub-committee to design structure and define meetings/checkpoints
   5. Reporting back to the sub-committee and potential attendance at the NCQAC meetings

The sub-committee is recommending that all seven interested people be appointed as pro tem members. There may be more than five advisory groups needed and there will be room for all to work on this project. Paula will contact the seven people that submitted their resume's, request their state applications, and pursue the appointments for one year terms.

C. <u>First meeting/Orientation/Retreat with sub-committee and advisory group leaders</u>
   1. Role of pro tem members, assignment, expectations,
   2. State Ethics law and HPQA procedure
   3. Open public meeting act and expectations: agendas, minutes, scheduling meetings
   4. Travel, reimbursement, SCAN cards
   5. Secretarial support: sending agendas to list serve, scheduling state office buildings for meetings, after hour's meetings, minutes distributed
        1. Maintaining interested party mailing list, scheduling and canceling conference calls using state operators
   6. Vision for Continuing Competency
      - Review Nursing Laws
      - Review UDA on Continuing Competency Pilot Projects
      - NCQAC strategic plan

The day before the workshop, July 11, was suggested for the orientation date. Any new commission members would also attend.

D. <u>Completion of charters</u>
   1. Recognition at an NCQAC meeting
   2. Certificates from NCQAC
   3. Certificates from Governor's office?
   4. Do you do continued education?
   5.

Todd had mentioned that when he served as a group member for the Dental Commission, they provided the members with certificates recognition their contributions. It would be great to offer our pro tem and small group member's certificates for their work on the continuing competency work.

IV. New business

A. <u>Next Meeting Date</u> : May 15, 2007, 7:00 pm

V. Adjournment

Potential Advisory Groups and Draft Charter Language

1. Documentation to be submitted to the Nursing Commission (NCQAC)
   A. Use the North Carolina model and approach
   B. Determine the requirements to be submitted to the NCQAC and the frequency
   C. Examine the relationship between renewal of licenses and demonstration of continuing competency
   D. Explore the staff expertise/qualifications and number of staff needed to evaluate documentation submitted
   E. Explore the NCQAC members time needed with documentation needed
   F. Discuss potential actions if a licensee is not compliant

2. Continuing education and continued employment
   A. Examine the National Council of State Boards of Nursing's research on the relationship of continuing education, continued employment and continuing competency
   B. Recommend requirements for the NCQAC to include hours of continuing education and continuing employment to be demonstrated on an annual, biennial or every _____ years
   C. Recommendations for collection of information, auditing of information
   D. Refresher courses: if someone is not 'working' as a nurse, what does this mean for licensure; if someone is not 'working' as a nurse, would a refresher course be required after three years of non-clinical work

3. Introspection/self reflection
   A. Determine that this piece would be a requirement, but would not be submitted to the NCQAC because of public disclosure concerns –
   B. Determine that there would need to be some protections in the rules
   C. Define the contents of the introspection/self reflection portion
   D. Describe the benefits of the introspection/self reflection
   E. List the potential obstacles to this and draft messages

4. Integration - stakeholders
   A. Identify stakeholders
   B. Gather contact information
   C. Assess stakeholder concerns, benefits to continuing competency and related issues
   D. Incorporate stakeholder input into the final plan/rules

5. Communication plan
   A. Describe how to contact stakeholders
   B. Determine when to contact stakeholders
   C. Suggest ways to contact stakeholders: videoconferencing, newsletter, annual meetings of organizations
   D. Produce key messages/PowerPoint document to reinforce consistent message going to all groups
   E. Develop travel and expense budget associated with communication

6. Implementation

A. Develop timeline for implementation
B. Work with the HPQA Section 6 rules manager to assure all paperwork is completed and coordinated: CR 101 completed prior to all stakeholder work, advisory group work, etc. to assure that input is collected in rules file
C. Consider a staged implementation: pilot project, RNs, LPNs, ARNPs, etc., geographic areas, etc.

7. LPN and ARNP groups
A. Are there considerations for LPNs that may be different than RNs
B. Are their considerations for ARNPs that my be different than RNs
C. Adaptation of materials for these audiences